



PATRICIA S. PLOEHN, LCSW  
Director

**County of Los Angeles**  
**DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place, Los Angeles, California 90020  
(213) 351-5602

September 3, 2010

To: Supervisor Gloria Molina, Chair  
Supervisor Mark Ridley-Thomas  
Supervisor Zev Yaroslavsky  
Supervisor Don Knabe  
Supervisor Michael D. Antonovich

From: Patricia S. Ploehn, LCSW  
Director

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**LOS ANGELES YOUTH NETWORK CONTRACT COMPLIANCE MONITORING  
REVIEW**

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Los Angeles Youth Network is located in the 3rd Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to its program statement, its stated goal is "to help abused, neglected and homeless adolescents become self-sufficient," and the agency is licensed to serve a capacity of 12 children, ages 12 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Los Angeles Youth Network in September 2009, at which time they had one 12-bed site and four placed DCFS children. Three of the children were males and one was female. For the purpose of this review, two placed children were interviewed and their case files were reviewed. The two remaining DCFS children had been recently placed and there was limited applicable information available for review; these two remaining children were not interviewed nor were their case files reviewed. The placed children's average overall length of placement was 13 months, and the average age was 16. Five staff files were reviewed for compliance with Title 22 regulations and contract requirements.

None of the placed children were on psychotropic medication.

**SCOPE OF REVIEW**

The purpose of this review was to assess Los Angeles Youth Network's compliance with the contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, two placed children's case files and a random sampling of personnel files. A visit was made to the facility to assess the quality of care and supervision provided to children, and interviews were conducted with the children to assess the care and services they were receiving.

## **LOS ANGELES YOUTH NETWORK**

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A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

### **SUMMARY**

In general, Los Angeles Youth Network was found to be providing good quality care to DCFS placed children, and the services were provided as outlined in its program statement. The children interviewed stated that they received educational support, opportunities to prepare for emancipation, and that they felt comfortable talking with the staff.

At the time of the review, Los Angeles Youth Network needed to address a few minor physical plant deficiencies, none of which posed a safety hazard to any placed children. In addition, the Group Home also needed to develop comprehensive Needs and Services Plans (NSP).

Los Angeles Youth Network was receptive to implementing some systemic changes to improve their compliance with regulations and the Foster Care Agreement.

### **NOTABLE FINDINGS**

The following are the notable findings of our review:

- Of the five NSPs reviewed, four were not comprehensive in that they did not complete all the required elements in accordance with the NSP template.
- One child stated that she did not feel safe in the group home because she was involved in an incident in which another female resident hit her. The OHCMD monitor immediately addressed this issue with Los Angeles Youth Network case manager, Ann McConville. Ms. McConville confirmed that two staff members intervened in a timely manner and protected the child, utilizing appropriate emergency intervention techniques. Additionally, on the day of the incident, May 14, 2009, the youth who assaulted the placed child was transferred to the Los Angeles Youth Network Shelter home.

The detailed report of our findings is attached.

### **EXIT CONFERENCE**

The following are highlights from the exit conference held October 16, 2009:

#### **In attendance:**

Ann McConville, Case Manager, Los Angeles Youth Network; and Scott Song, Monitor, DCFS OHCMD.

**Highlights:**

The Case Manager was in agreement with our findings and recommendations. She stated that she would present the findings to the Residential Programs Director, Katie Andrews, for further review.

As agreed, Los Angeles Youth Network provided a timely written Corrective Action Plan (CAP) addressing each recommendation noted in this compliance report. The CAP is attached.

As noted in the monitoring protocol, a follow-up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

If you have any further questions, please call me or your staff may contact Armand Montiel, Board Relations Manager at (213) 351-5530.

PSP:LP:MG

EAH:BB:ss

**Attachments**

c: William T Fujioka, Chief Executive Officer  
Wendy Watanabe, Auditor-Controller  
Donald H. Blevins, Chief Probation Officer  
Public Information Officer  
Audit Committee  
Sybil Brand Commission  
Bob Ruchhoft, President, Board of Directors, Los Angeles Youth Network  
Matt Kamin, Executive Director, Los Angeles Youth Network  
Jean Chen, Regional Manager, Community Care Licensing



**LOS ANGELES YOUTH NETWORK  
PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW**

**Beachwood House  
2471 Beachwood Dr.  
Los Angeles, CA 90068  
License Number: 197603055  
Rate Classification Level: 7**

The following report is based on a "point in time" monitoring visit and addresses findings noted during the September 2009 monitoring review.

**CONTRACTUAL COMPLIANCE**

Based on our review of two children's files and five staff files, Los Angeles Youth Network was in full compliance with five of nine sections of our Contract Compliance review: Licensure/Contract Requirements; Educational and Emancipation Services; Recreation and Activities; Children's Health-Related Services; and Clothing and Allowance. The following report details the results of our review:

**FACILITY AND ENVIRONMENT**

Based on our review of Los Angeles Youth Network's Beachwood Group Home and interviews with the two children, Los Angeles Youth Network fully complied with three of six elements in the area of Facility and Environment.

The Group Home maintained sufficient recreational equipment in good condition and age appropriate. The Group Home had an appropriate quantity and quality of reading materials, education resources and supplies including computers readily available to the children. The Group Home maintained adequate perishable and non-perishable foods.

The Group Home's exterior and grounds were not well-maintained. The outside stairway, front face of the 2nd floor and front-facing window frames on both the 1st and 2nd floors were in need of painting due to extensive chipping and fading. Additionally, the staff door was warped and damaged and needed repair.

In general, the common quarters were well-maintained. The living room, dining room, kitchen and study rooms created a clean, home-like environment. However, the grout and shelf/wall of the bathtub in the downstairs bathroom needed to be cleaned, and the wall outside of the bathtub needed to be repaired. The walls and ceiling of the 2nd upstairs bathroom needed painting and the flooring needed to be replaced. There was also a hole in the upstairs hallway wall which needed to be repaired.

Children's bedrooms were well-maintained. However, there was a hole in the wall of bedroom #6, and bedroom #3 was missing a window screen.

The Auditor Controller's (A-C) prior year review also noted that Los Angeles Youth Network did not always ensure that the Group Home's facility was maintained in accordance with CDSS Title 22 regulations.

## **LOS ANGELES YOUTH NETWORK**

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#### **Recommendations:**

Los Angeles Youth Network shall ensure that:

1. The Group Home site is maintained and in good repair in accordance with Title 22 regulations.

#### **PROGRAM SERVICES**

Based on our review of two children's case files, Los Angeles Youth Network fully complied with seven of eight elements in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in its program statement. In addition, the Group Home obtained the DCFS CSWs' authorization to implement Needs and Services Plans (NSP) and the treatment team developed and implemented NSPs with input from the child. The children were receiving recommended treatment services based on their psychological assessments/evaluations.

However, only one of the five NSPs reviewed were comprehensive. The NSPs needed to include measurable goals with projected completion dates and a completed Life Skills Training/Emancipation Preparation page.

#### **Recommendations:**

Los Angeles Youth Network management shall ensure that:

2. NSPs are complete and comprehensive, including all required elements.

#### **PERSONAL RIGHTS**

Based on our review of two children's case files and interviews with the two children, Los Angeles Youth Network fully complied with 8 of the 9 applicable elements in the area of Personal Rights. Two of the 11 elements were not applicable as they pertain to psychotropic medication and neither of the two sampled children were on psychotropic medication.

The two children reported that Los Angeles Youth Network informed them of the group home policies and procedures and that staff treated them with respect and dignity. An appropriate rewards and discipline system was in place and the children were free to receive or reject voluntary medical, dental and psychiatric care. The children were allowed private visits, to make and receive telephone calls, and to send and receive unopened correspondence/mail. The children were also free to attend religious services and activities of their choice. In addition, the children were given reasonable chores.

During our review, one child stated that she did not feel safe in the group home because she was involved in an incident in which another female resident hit her. The OHCMD monitor immediately addressed this issue with Los Angeles Youth Network case manager, Ann McConville. Ms. McConville confirmed that two staff members intervened in a timely manner and protected the child, utilizing appropriate emergency intervention techniques. Additionally, on the day of the incident, May 14, 2009, the youth who assaulted the



## **LOS ANGELES YOUTH NETWORK**

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sampled child was transferred to the Los Angeles Youth Network Shelter home, and was no longer a threat to the interviewed child.

During our review, one child stated that she wanted the snacks to be available and accessible throughout the day. However, she confirmed that the group home gave the children between meal snacks each day (in accordance with Title 22 regulations).

#### **Recommendations:**

Los Angeles Youth Network management shall ensure that:

3. All children are adequately protected by providing staff members with appropriate training and current Emergency Intervention certification.

#### **PERSONNEL RECORDS**

Based on our review of five staff personnel files, Los Angeles Youth Network fully complied with seven of 12 elements in the area of Personnel Records.

All five staff reviewed met the educational/experience requirements, submitted timely criminal fingerprint cards, Child Abuse Central Index (CACI) clearances and signed a criminal background statement in a timely manner. They also had valid driver's licenses and received the required initial and on-going training.

However, two staff members did not receive their initial health screenings in a timely manner and had no current CPR and First Aid training on file. One staff member did not have a signed copy of the group home's policies and procedures, and another staff member had no emergency intervention training on file.

#### **Recommendations:**

Los Angeles Youth Network management shall ensure that:

4. All staff members receive timely initial Health Screenings.
5. All staff members receive and sign the group home's policies and procedures.
6. All staff members receive CPR, First Aid and Emergency Intervention training.

#### **PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S REPORT**

##### **Objective**

Determine the status of the recommendations reported in the A-C's prior monitoring review.

##### **Verification**

We verified whether the outstanding recommendations from the A-C's monitoring review report issued April 10, 2009 were implemented.

**Results**

The A-C's prior monitoring review report contained two outstanding recommendations. Specifically, Los Angeles Youth Network was to ensure that the Group Home was maintained in good repair in accordance with Title 22 regulations, and that they provided the children with sufficient quantities of food, allowing for second portions.

Based on our follow-up of these recommendations, Los Angeles Youth Network partially implemented the A-C's recommendation related to maintaining the group home in good repair in accordance with Title 22 regulations. The A-C's recommendation that the facility provided sufficient quantities of food for second portions was fully implemented.

**Recommendation:**

Los Angeles Youth Network management shall ensure that:

7. It fully implements the outstanding recommendation from the A-C's Monitoring Review Report issued April 10, 2009, which is noted in this report as Recommendation 1.

**LOS ANGELES YOUTH NETWORK  
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY**

2471 Beachwood Dr.  
Los Angeles, CA 90068  
License Number: 197603055  
Rate Classification Level: 7

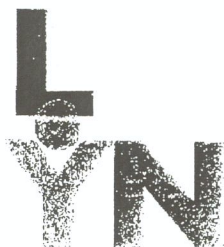
	<b>Contract Compliance Monitoring Review</b>	<b>Findings: September 2009</b>
I	<b><u>Licensure/Contract Requirements</u></b> (9 Elements) <ol style="list-style-type: none"> <li>1. Timely Notification for Child's Relocation</li> <li>2. Stabilization to Prevent Removal of Child</li> <li>3. Transportation</li> <li>4. SIRs</li> <li>5. Compliance with Licensed Capacity</li> <li>6. Disaster Drills Conducted</li> <li>7. Disaster Drill Logs Maintenance</li> <li>8. Runaway Procedures</li> <li>9. Allowance Logs</li> </ol>	Full Compliance (ALL)
II	<b><u>Facility and Environment</u></b> (6 Elements) <ol style="list-style-type: none"> <li>1. Exterior Well Maintained</li> <li>2. Common Areas Maintained</li> <li>3. Children's Bedrooms/Interior Maintained</li> <li>4. Sufficient Recreational Equipment</li> <li>5. Sufficient Educational Resources</li> <li>6. Adequate Perishable and Non Perishable Food</li> </ol>	<ol style="list-style-type: none"> <li>1. Improvement Needed</li> <li>2. Improvement Needed</li> <li>3. Improvement Needed</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> </ol>
III	<b><u>Program Services</u></b> (8 Elements) <ol style="list-style-type: none"> <li>1. Child Population Consistent with Program Statement</li> <li>2. DCFS CSW Authorization to Implement NSPs</li> <li>3. Children's Participation in the Development of NSPs</li> <li>4. NSPs Implemented and Discussed with Staff</li> <li>5. Therapeutic Services Received</li> <li>6. Recommended Assessments/Evaluations Implemented</li> <li>7. DCFS CSWs Monthly Contacts Documented</li> <li>8. Comprehensive NSPs</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Improvement Needed</li> </ol>
IV	<b><u>Educational and Emancipation Services</u></b> (4 Elements) <ol style="list-style-type: none"> <li>1. Emancipation/Vocational Programs Provided</li> <li>2. ILP Emancipation Planning</li> <li>3. Current IEPs Maintained</li> <li>4. Current Report Cards Maintained</li> </ol>	Full Compliance (ALL)



V	<b><u>Recreation and Activities</u></b> (3 Elements) <ol style="list-style-type: none"> <li>1. Participation in Recreational Activity Planning</li> <li>2. Participation in Recreational Activities</li> <li>3. Participation in Extra-Curricular, Enrichment and Social Activities</li> </ol>	Full Compliance (ALL)
VI	<b><u>Children's Health-Related Services (including Psychotropic Medications)</u></b> (9 Elements) <ol style="list-style-type: none"> <li>1. Current Court Authorization for Administration of Psychotropic Medication</li> <li>2. Current Psychiatric Evaluation Review</li> <li>3. Medication Logs</li> <li>4. Initial Medical Exams Conducted</li> <li>5. Initial Medical Exams Timely</li> <li>6. Follow-up Medical Exams Timely</li> <li>7. Initial Dental Exams</li> <li>8. Initial Dental Exams Timely</li> <li>9. Follow-Up Dental Exams Timely</li> </ol>	Full Compliance (ALL)
VII	<b><u>Personal Rights</u></b> (11 Elements) <ol style="list-style-type: none"> <li>1. Children Informed of Home's Policies and Procedures</li> <li>2. Children Feel Safe</li> <li>3. Satisfaction with Meals and Snacks</li> <li>4. Staff Treatment of Children with Respect and Dignity</li> <li>5. Appropriate Rewards and Discipline System</li> <li>6. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care</li> <li>7. Children Allowed Private Visits, Calls and Correspondence</li> <li>8. Children Free to Attend Religious Services/Activities</li> <li>9. Reasonable Chores</li> <li>10. Children Informed about Psychotropic Medication</li> <li>11. Children Aware of Right to Refuse Psychotropic Medication</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Improvement Needed</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Full Compliance</li> <li>9. Full Compliance</li> <li>10. N/A</li> <li>11. N/A</li> </ol>
VIII	<b><u>Children's Clothing and Allowance</u></b> (8 Elements) <ol style="list-style-type: none"> <li>1. \$50 Clothing Allowance</li> <li>2. Adequate Quantity of Clothing Inventory</li> <li>3. Adequate Quality of Clothing Inventory</li> <li>4. Involvement in Selection of Clothing</li> <li>5. Provision of Personal Care Items</li> <li>6. Minimum Monetary Allowances</li> </ol>	Full Compliance (ALL)

	7. Management of Allowance 8. Encouragement and Assistance with Life Book	
IX	<b><u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u></b> (12 Elements) <ol style="list-style-type: none"> <li>1. Education/Experience Requirement</li> <li>2. Criminal Fingerprint Cards Timely Submitted</li> <li>3. CAIs Timely Submitted</li> <li>4. Signed Criminal Background Statement Timely</li> <li>5. Employee Health Screening Timely</li> <li>6. Valid Driver's License</li> <li>7. Initial Training Documentation</li> <li>8. Signed Copies of GH Policies and Procedures</li> <li>9. CPR Training Documentation</li> <li>10. First Aid Training Documentation</li> <li>11. On-going Training Documentation</li> <li>12. Emergency Intervention Training Documentation</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Improvement Needed</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Improvement Needed</li> <li>9. Improvement Needed</li> <li>10. Improvement Needed</li> <li>11. Full Compliance</li> <li>12. Improvement Needed</li> </ol>





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**Douglas Stanton**  
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Attn: Department of Children and Family Services  
Out of Home Care Management  
Re: CAP – Beachwood Group Home Compliance review

11-11-09

The following is our proposed Corrective Action Plan in response to the "Group Home Contract Compliance Review Field Exit Summary" dated 10/16/09 for the Beachwood Group Home.

**Facility and Environment**

This recommendation will be implemented by February 2010. Gensler Architecture Firm located in Los Angeles is providing LAYN with needed appliances and repair services needed. The items and equipment have been purchased and volunteers will be completing this work. Due to the holidays, the volunteers will begin work on these projects after the first of the year. We project that all recommendations for the Beachwood Group Home, paint outside of stairway, paint front face of the house on the second floor, paint front-facing window frames on both the first and second floors, repair/replace the staff office door, cleaning of the grout and shelf/wall of the downstairs bathtub, repair of wall outside of the bathtub, painting of walls & ceiling, replace floor in 2<sup>nd</sup> upstairs bathroom and replacement of screen in bedroom #3, will be completed by 2-28-08. Holes in upstairs hallway and bedroom #6 have been repaired.

Facility Manager, Kaleia McElehenney, will monitor facility and environment and report any concerns to the Residential Program Director, Katie Anderson. Residential Program Director will report any maintenance concerns to the correct department and ensure that repairs are completed in a timely manner. In addition Residential Program Director will ensure that Executive Director, Matt Kamin, is made aware of any maintenance issues.

**Personal Rights**

Youth reported not feeling safe in the home due to a physical altercation that occurred between two youth. All staff at the Los Angeles Youth Network receives training in emergency intervention response in the form of non-physical de-escalation training when working with youth. This

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**Executive Director**

**Matt Kamin**

training ensures that staff is well prepared to handle physical alterations and other disruptive behaviors. In addition, on Thursday nights a house meeting is held with youth where we encourage them to discuss any concerns that they may have in the program. Residential Program Director attends this house meeting. Residential Program Director is an on-call position and available to come into the program when needed to assist with de-escalation of youth.

**Personnel Records**

All employees will receive timely initial health-screenings. The Director of Human Resources, Mayra Camarillo, will ensure that all staff complete health-screenings and proper documentation is placed in the employee's personnel record before the employee is placed on shift. Ms. Camarillo will complete self-audits for quality assurance that all health-screenings are present in records.

All employees will view and sign copies of the group home policies and procedures. Ms. Camarillo will ensure that all staff view and sign copies of the group home policies and procedures and that proper documentation is placed in the employee's personnel record. Ms. Camarillo will complete self-audits for quality assurance that all signed policies and procedure documents are present in the records.

All appropriate employees will receive CPR training in the area of child abuse identification and reporting and all appropriate employees will receive first aid training. Ms. Camarillo will ensure that all staff receives CPR and first aid training in a timely manner. Ms. Camarillo will complete self-audits for quality assurance that all signed policies and procedure documents are present in the records.

All appropriate employees will receive emergency intervention training per the GH's Program Statement. Ms. Camarillo will ensure that all staff participate and receive emergency intervention training in a timely manner and will complete self-audits for quality assurance that all appropriate employees have received emergency intervention training.

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**Douglas Stanton**  
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**Executive Director**

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Sincerely,

*Katie Anderson, BSW*

Katie Anderson, BSW  
Residential Program Director  
LA Youth Network  
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